DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION

(37 CFR 1.63)

PTO/SB/01 (10-00) Approved for use through 10/31/2002. OMB 0651-0032

Hauptmann, Jörg

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COMPLETE IF KNOWN

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Attorney Docket Number

First Named Inventor

Application Number

| ☐ Declaration ☐ | Declaration | Filing Date | | | | | | |
|--|---|--|---|------------------|---------------------|--|--|--|
| Submitted OR with Initial | Submitted after Initia Filing (surcharge | Group Art Unit | | | | | | |
| Filing | (37 CFR 1.16 (e)) required) | Examiner Nam | ne | | | | | |
| | | | | | | | | |
| · | As a below named inventor, I hereby declare that: | | | | | | | |
| My residence, mailing address, ar | nd citizenship are as state | ed below next to my na | ime. | | | | | |
| I believe I am the original, first and names are listed below) of the sul | d sole inventor (if only one bject matter which is clain | e name is listed below ned and for which a pa |) or an original, firs | t and joint inve | ntor (if plural | | | |
| TONE SIGNAL DETECTION CIRCUIT FOR DETECTING TONE SIGNALS | | | | | | | | |
| the enceification of which | (Title of the Invention) | | | | | | | |
| the specification of which is attached hereto | | | | | | | | |
| OR as United States Application Number or PCT International | | | | | | | | |
| was filed on (MM/DD/YYYY) | | | | | | | | |
| Application Number and was amended on (MM/DD/YYYY) (if applicable). | | | | | | | | |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. | | | | | | | | |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | | | | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | | · | ppy Attached? NO | | | |
| 100 43 160.7-35 | Germany | 09/01/2000 | | | 7.P-1 | | | |
| | | | | | X . | | | |
| | | | | | 무 | | | |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | | | |
| I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. | | | | | | | | |
| Application Number(s) Filing Date (N | | (MM/DD/YYYY) | Additional provisional application numbers are listed on a súpplemental priority data sheet PTO/SB/02B attached hereto. | | ta sheet | | | |
| | | | | | | | | |

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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | | | | | | |
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| Additional inventors are being named on the 1_supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. | | | | | | | |

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page <u>1</u> of <u>1</u>

| Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor | | | | | | |
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